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In re: Michael Evans et al.
Case: P4800C1 Application No.: 10/733,076 Filing date: 12/10/2003
Art Unit: 2617 Examiner: Gary Au
Subject: Networking by Matching Profile Information Over a Data-Packet-Network and a Local Area Network

Certificate of Transmission under 37 CFR 1.8

Attention: Gary Au, Examiner

Fax No.: (571) 273-8300

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JUL 25 2006

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CASE DOCKET NO. P4800C1

In reference to application of Michael Evans et al.

Serial No. 10/733,076

For Networking by Matching Profile Information Over a Data-Packet-Network and a Local Area Network

Sir:

Transmitted herewith is and an amendment in the above-identified application, under 37 C.F.R. 1.312.

- ☒ No additional fee is required.
☒ Applicant claims Small entity status under 37 CFR 1.27.
☐ The fee has been calculated as shown below.

**** CLAIMS AS AMENDED ****

| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
|---|-------------------------------------|-------|------------------------------------|------------------|------------------------------------|-------------------------|-------------------|
| | Claims Remaining After Amendment | | Highest No. Paid For Previously | Present Extra | Rate Small Entity | Rate Large Entity | Additional Fee |
| Total Claims | 10 | Minus | ** 20 | 0 | \$ 25 | \$ 50 | \$ 0.00 |
| Indep Claims | 2 | Minus | *** 3 | 0 | \$ 100 | \$ 200 | \$ 0.00 |
| <input type="checkbox"/> First presentation of a multiple dependent claim | | | | | \$ 0 | \$ 0 | \$ 0.00 |
| <input type="checkbox"/> Terminal Disclaimer Fees | | | | | | | \$ 0.00 |
| Extension Fee | <input type="checkbox"/> 1st Month | | <input type="checkbox"/> 2nd Month | | <input type="checkbox"/> 3rd Month | | \$ 0.00 |
| Total additional for claims, time extensions and disclaimer fees | | | | | | | \$ 0.00 |

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* If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

☐ A check in the amount of 0.00 is attached.☐ Charge \$ 0.00 to deposit account 50-0534 . (A duplicate of this sheet is enclosed)☒ Please charge any additional fees or credit overpayment to Deposit Account 50-0534 . A duplicate of this sheet is enclosed.Respectfully Submitted, /Donald R. Boys/Donald R. Boys
Reg. No. 35074Central Coast Patent Agency, Inc.
P.O. Box 187
Aromas, CA 95004
(831) 726-1457

Method of Transmission: Facsimile

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| (1) | (2) Claims Remaining After Amendment | (3) | (4) Highest No. Paid For Previously | (5) Present Extra | (6) Rate Small Entity | (7) Rate Large Entity | (8) Additional Fee |
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| Total additional for claims, time extensions and disclaimer fees | | | | | | | \$ 0.00 |

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Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Dear Sir:

RESPONSE A